

# HEALTHY FOOD ENVIRONMENT POLICY INDEX (FOOD-EPI) – AUSTRALIA 2022

Queensland Government

Summary of current government policy action to 30 June 2021

Policy details

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## Definitions

- **Food:** refers to food and non-alcoholic beverages. It excludes breastmilk or breastmilk substitutes.
- **Food environments:** the collective physical, economic, policy and socio-cultural surrounding, opportunities and conditions that influence people's food and beverage choices and nutritional status.
- **Government:** includes any government departments and, where appropriate, other agencies (i.e. statutory bodies such as offices, commissions, authorities, boards, councils, etc). Plans, strategies or actions by local government should not be included, although relevant information can be noted in the 'context/comments' sections.
- **Government implementation:** refers to the intentions and plans of the government and actions and policies implemented by the government as well as government funding for implementation of actions undertaken by non-governmental organisations, academic institutions, private companies (including consultants), etc.
- **Healthy/unhealthy food:** Categorisation of foods as healthy / unhealthy are in accordance with the Australian Dietary Guidelines (i.e. core and discretionary foods). Where it is not clear which category to use, categorisation of foods should be informed by rigorous criteria or the use of a nutrient profiling model.
- **Nutrients of concern:** salt (sodium), saturated fat, *trans* fat, added sugar
- **Policy actions:** A broad view of "policy" is taken so as to include all government policies, plans, strategies and activities. Only current policy actions are considered, generally defined as policy activity of the previous 12 months (except where otherwise specified). Evidence of policy implementation takes consideration of the whole policy cycle, from agenda-setting, through to policy development, implementation and monitoring. A broad view of relevant evidence was taken, so as to include, *inter alia*:
  - Evidence of commitments from leadership to explore policy options
  - Allocation of responsibility to an individual/team (documented in a work plan, appointment of new position)
  - Establishment of a steering committee, working group, expert panel, etc.
  - Review, audit or scoping study undertaken
  - Consultation processes undertaken
  - Evidence of a policy brief/proposal that has been put forward for consideration
  - Preparation of a regulatory or economic impact assessment, health impact assessment, etc.
  - Regulations / legislation / other published policy details
  - Monitoring data
  - Policy evaluation reports

## Policy area: Food Labelling

Good practice statement for this domain: There is a regulatory system implemented by the government for consumer-oriented labelling on food packaging and menu boards in restaurants to enable consumers to easily make informed food choices and to prevent misleading claims

### Indicators in this domain by level of government:

Policy area: Food labelling		
National	Federal	State/Territory
NAT_LABEL1: Ingredient lists/declarations		ST_LABEL1: Nutrition labelling in fast food outlets
NAT_LABEL2: Labelling added sugars		
NAT_LABEL3: Labelling fats and oils		
NAT_LABEL4: Regulatory system for health claims		
NAT_LABEL5: Regulatory system for nutrition content claims		
NAT_LABEL6: Front-of-pack nutrition labelling: healthiness indicator		
NAT_LABEL7: Front-of-pack nutrition labelling: health warnings		
NAT_LABEL8: Nutrition information on alcoholic beverages		
NAT_LABEL9: Nutrition labelling in fast food outlets		

## Details on State/Territory-level indicators in this domain:

ST_LABEL1 Nutrition labelling in fast food outlets	
<p><i>Good practice statement</i></p> <p>Consistent, interpretive, evidence-informed nutrition labelling at point-of-purchase is applied by all major quick service restaurant chains, which clearly informs consumers regarding the energy content and nutrient quality of foods and meals on sale</p>	
<b>Definitions and scope</b>	<ul style="list-style-type: none"> <li>• Quick service restaurants: In the Australian context this definition includes fast food chains as well as coffee, bakery and snack food chains. It may also include supermarkets where ready-to-eat foods are sold.</li> <li>• Labelling systems: Includes any point-of-sale (POS) nutrition information such as total kilojoules; percent daily intake; traffic light labelling; star rating, or specific amounts of nutrients of concern</li> <li>• Menu board includes menu information at various points of purchase, including in-store, drive-through and online purchasing</li> <li>• Includes endorsement schemes (e.g., accredited healthy choice symbol) on approved menu items</li> </ul>
<b>Context</b>	<p>In each state where regulations apply (ACT, NSW, SA, VIC, QLD), chain food companies with a minimum number of outlets in the state/nationally and who sell standardised ready-to-eat food/drink items must display the kilojoule content of each standard menu item on all menus, drive through menu boards, tags and labels that display the name or price of menu items. The display must be clear and legible. The statement, “The average adult daily energy intake is 8700kJ,” must also be prominently featured. In these states (except Victoria), other chains/food outlets are allowed to provide this information on a voluntary basis, but must follow the provisions of the legislation. As a result, national companies will in some cases implement menu labelling changes in all of their stores across Australia (<a href="#">ref</a>). However, there is the need for auditing in some jurisdictions for this to continue to be implemented consistently (<a href="#">ref</a>).</p> <p><i>National Review of fast-food menu labelling schemes</i></p> <ul style="list-style-type: none"> <li>• A review of the fast-food menu labelling schemes was conducted in 2018 and included 2 roundtable discussions with stakeholders. The summary report for this work is available at the Food Regulation website (<a href="#">ref</a>).</li> <li>• Views on additional information and interpretative information were sought as part of the consultation.</li> <li>• In June 2018, the then Australian and New Zealand Ministerial Forum on Food Regulation agreed for further targeted consultation to be undertaken to develop policy options that aim to improve and strengthen fast food menu labelling in Australia.</li> <li>• Between October and December 2018, a co-design process was used to work with public health and industry stakeholders on possible solutions for five key issues: legibility; business coverage and equity; electronic menus; combination meals; multiple serve items.</li> <li>• In August 2019, the Forum agreed that nationally consistent menu labelling is desirable for food industry, public health organisations and government. The Forum agreed the most effective way would be to develop a food regulatory measure under the Food Standards Code, with the development of a Ministerial policy guideline in line with best practice regulation) as a first step. Australian and New Zealand stakeholders were invited to respond to the Public Consultation Regulatory Impact Statement to inform the development of policy guidance and effective policy framework for consistent menu labelling (<a href="#">ref</a>) (consultation opened 8 April and closed 3 June 2021).</li> </ul>

**Policy details (to 30 June 2021)**

[National review of fast-food menu labelling](#)

- The Queensland Department of Health is leading the national review of fast-food menu labelling schemes in Australia and New Zealand. Queensland is partnering with the Australian Government Department of Health, New South Wales Food Authority, South Australia Health, Tasmania Department of Health and New Zealand Ministry of Primary Industries to progress this work. Further details of the review are found in the National policy actions document.
- Any changes to the legislative provisions for menu labelling in Queensland will be considered following the outcomes of the national review.

[Queensland fast-food menu labelling](#)

- An education campaign ('Kilojoules on the Menu') to help Queenslanders use the kilojoule information to make healthier choices was in market from end of February until mid-April 2017. This initiative was part of the larger healthy lifestyle education campaign, [Healthier. Happier.](#)
- Based on customer-intercept surveys (787 customers across 11 chains, June 2018), 60% reported that having kilojoule information displayed gives them confidence to make healthy choices ([ref](#)). Most consumers (79%) would not change how often they visit fast-food outlets based on knowing the kilojoule content of menu items. The completion of the evaluation of the impact of menu labelling (2016-2018) on the nutritional profile of menu items was superseded by the release of The George Institute's *Food Switch: State of the Food Supply* in April 2019.

## Policy area: Food Promotion

Good practice statement for this domain: There are comprehensive regulations to reduce the exposure of children (<18 years) to the promotion of unhealthy food and beverages (and related brands) across all media and in public spaces

### Indicators in this domain by level of government:

Policy area: Food promotion		
National	Federal	State/Territory
	AUD_PROMO1: Restrict promotion of unhealthy foods in broadcast media	ST_PROMO1: Restrict exposure of children to promotion of unhealthy food in public settings
	AUD_PROMO2: Restrict promotion of unhealthy foods online	ST_PROMO2: Restrict the promotion of unhealthy foods within elite sport
	AUD_PROMO3: Restrict use of elements appealing to children on food packaging	
	AUD_PROMO4: Restrict the promotion of unhealthy foods within elite sport	



**Details on State/Territory-level indicators in this domain:**

<p><b>ST_PROMO1</b> Restrict exposure of children to promotion of unhealthy food in public settings</p>	
<p><i>Good practice statement</i>            Effective policies are implemented by the government to restrict the exposure of children (including adolescents) to the promotion of unhealthy foods and beverages (and related brands) in public settings (e.g. outdoor and public transport advertising, community events)</p>	
<p><b>Definitions and scope</b></p>	<ul style="list-style-type: none"> <li>• This indicator is about <b>promotion</b> (eg. advertising, sponsorship). Product availability (eg in canteens, vending machines) is covered in the FOOD PROVISION domain</li> <li>• Public settings include: public transport (train stations, bus stops etc), outdoor billboards, government buildings, areas in and around schools, preschools/ kindergartens, day-care centres, children’s health services (including primary care, maternal and child health or tertiary settings), community sport, recreation and play areas / venues/ facilities and cultural/community events where children (including adolescents) are commonly present</li> <li>• Includes fundraising and direct marketing in these settings</li> <li>• Includes restrictions on marketing in government-owned or managed facilities/venues (including within the service contracts where management is outsourced)</li> <li>• ‘Effective’ means that the policies are likely to reduce overall exposure of children (including adolescents) to promotion of unhealthy food and beverages and related brands</li> <li>• Excludes alcohol marketing restrictions</li> <li>• Excludes elite sport (covered in ST_PROMO2)</li> </ul>
<p><b>Policy details (to 30 June 2021)</b></p>	<p><a href="#">Queensland Government Sponsorship Policy</a></p> <ul style="list-style-type: none"> <li>• The Queensland Government sponsors businesses, associations, local councils and not-for-profits to deliver significant initiatives and events that align with current government objectives, deliver economic benefit and leverage opportunities for government. Sponsorship funding is distributed in accordance with the principles outlined in the Queensland Government Sponsorship Policy (a Policy led by DPC).</li> <li>• Based on data provided by the annual sponsorship reporting, the Queensland Government has not provided direct sponsorship funding over the past two years (2019-2020) to any commercial food companies that market unhealthy foods and beverages.</li> </ul> <p><a href="#">Healthier Advertising on Government Owned Spaces</a></p> <ul style="list-style-type: none"> <li>• The Queensland Government in 2019 announced that unhealthy food and drink (including alcohol) must not be advertised on Queensland Government advertising spaces.</li> <li>• Since this time the Queensland Government has undertaken engagement with stakeholders with regard to implementation of the policy guideline.</li> <li>• Two rounds of stakeholder consultation with public health, consumer and industry stakeholders, further analysis of similar policies elsewhere and a pilot compliance audit of advertising spaces has informed a revised Guideline that is awaiting approval.</li> </ul>

#### Healthier food and drinks at healthcare facilities

- The Queensland Department of Health developed the Healthier drinks at healthcare facilities ([ref](#)) and Best Practice Guide for use by all Hospital and Health Services (HHSs) in June 2016. In 2019, this Guide was superseded by the Health Service Directive Healthier drinks at healthcare facilities (the Directive) – a mechanism for requiring mandatory implementation of A Better Choice. See ST\_PROV2 for more information.
- The Directive mandates that only healthy food and drinks, classified as GREEN, can be promoted and advertised.

#### National interim guide to reduce children’s exposure to unhealthy food and drink promotion

- Queensland contributed to the development of a national interim guide for reducing children’s exposure to unhealthy food and drink marketing. This guide was endorsed by Ministers at the August 2018 COAG Health Council meeting, noting that the guide is for voluntary use by governments ([ref](#)). Further details of the guide are found in the National policy actions document (NAT\_PLATF1).

## ST\_PROMO2 Restrict the promotion of unhealthy foods within elite sport

### *Good practice statement*

Effective policies are implemented by the government to ensure that professional/elite sports are not sponsored by brands associated with unhealthy foods and beverages

#### **Definitions and scope**

- This indicator is focused on promotion related to professional/elite sports only
- Sponsorship includes advertising at sporting grounds/events, naming rights of stadiums, games or series; branded merchandise, product giveaways, logos on uniforms, and exclusive sale rights of unhealthy food at events
- Excludes alcohol marketing restrictions

#### **Policy details (to 30 June 2021)**

- Stadiums Queensland (SQ) and the Department of Tourism, Innovation and Sport (DTIS) suggest that policies aimed at reducing professional/elite sports sponsorship are implemented with a national focus as leagues operate nationally. No policies have been implemented preventing professional/elite sports sponsorship by brands associated with unhealthy foods and beverages in Queensland.
- The Queensland Academy of Sport (QAS) confirmed that the Queensland Government's A Better Choice healthy food and drink supply strategy is the guiding policy for food and drink supply in Queensland Government facilities (and workplaces). QAS does not have a food policy as they have a very limited food supply that occurs within the QAS facilities – e.g. no canteens, vending machines, fundraisers, etc.

## Policy area: Food Provision

Good practice statement for this domain: The government ensures that there are healthy food service policies implemented in government-funded settings to ensure that food provision encourages healthy food choices, and the government actively encourages and supports private companies to implement similar policies

### Indicators in this domain by level of government:

Policy area: Food Provision		
National	Federal	State/Territory
NAT_PROV1: Healthy food policies in early childhood settings	AUD_PROV1: Healthy food policies in public sector workplaces	ST_PROV1: Healthy food policies in schools
NAT_PROV2: Healthy food policies in schools	AUD_PROV2: Support and training systems for private companies	ST_PROV2: Healthy food policies in health services (visitors and staff)
NAT_PROV3: Healthy food policies in care settings (resident/in-patient food provision)		ST_PROV3: Healthy food policies in care settings (resident/in-patient food provision)
		ST_PROV4: Healthy food policies in public sector workplaces
		ST_PROV5: Healthy food policies in community settings
		ST_PROV6: Support and training systems for public sector settings

## Details on State/Territory-level indicators in this domain:

<b>ST_PROV1 Healthy food policies in schools</b>	
<p><i>Good practice statement</i></p> <p>The government ensures implementation of clear, consistent policies to provide and promote healthy food choices in schools, inclusive of all food service activities (canteens, food at events, fundraising, promotions, vending machines etc.)</p>	
<b>Definitions and scope</b>	<ul style="list-style-type: none"> <li>• Schools include government and non-government primary and secondary schools (up to year 12)</li> <li>• Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices</li> <li>• Includes policies that relate to school breakfast programs, where the program is partly or fully funded, managed or overseen by the government</li> <li>• Excludes training, resources and systems that support the implementation of these policies (see ST_PROV6)</li> </ul>
<b>Context</b>	<p><i>Government and non-government schools</i></p> <p>The operation of government schools is the responsibility of the relevant State/Territory Education Minister, while non-government schools (i.e. Catholic and Independent schools) are established and operate under conditions set by State/Territory government registration authorities.</p>
<b>Policy details (to 30 June 2021)</b>	<p><i>Early years education and care services</i></p> <ul style="list-style-type: none"> <li>• State schools in selected communities are approved to deliver kindergarten programs (known as State Delivered Kindergarten) and must comply with requirements of the Education and Care Services National Law or <i>the Education and Care Services Act 2013</i> (Qld). Where food is provided by the school, the State Delivered Kindergarten must comply with <i>Smart Choices – Healthy Food and Drink Supply Strategy for Queensland Schools</i>.</li> <li>• It is a requirement for all early childhood education and care services to have a policy and procedure in place in relation to nutrition, food and beverages, and dietary requirements under the National Regulations (168(2)(a)(i).</li> <li>• Assessment and rating of early childhood education and care services against the National Quality Standards, specifically element 2.1.3 – Healthy Lifestyle is also a responsibility of the Department of Education.</li> <li>• Other Queensland early childhood education and care services such as those that are regulated under the Education and Care Services Act 2013, are not assessed under the National Quality Framework. However, services operating under this Act are required to meet legislative requirements in relation to health, hygiene, food, beverages and safe food practices.</li> <li>• There are recommended guidelines for education and care services to follow, such as the National Health and Medical Research Council (NHMRC) publication <i>Staying Healthy: Preventing infectious diseases in early childhood education and care services</i> for advice about health, hygiene and food safety practices.</li> <li>• There are other food safety rules and legislation that apply to those early childhood education and care services that provide food and beverages to children: “Food safety legislation for all states and territories references the Food Safety Standards and details the responsibilities of food handlers. Food authorities in each state or territory monitor compliance with the Food Safety Standards. Food authorities in some jurisdictions also require providers that supply food and beverages to register as a food business” (ACECQA (2020) Guide to the National Quality Framework: page 367).</li> </ul>

- The recommended resource for early childhood education and care services is the Australian Government guidelines (*Get Up & Grow: Healthy Eating and Physical Activity for Early Childhood, and/or Australian Dietary Guidelines*).

*Smart Choices, Healthy Food and Drink Supply Strategy for Queensland Schools*

- Implementation of the Smart Choices strategy is mandatory in all government schools, and strongly encouraged for Catholic and Independent schools.
- The strategy applies to all situations where food is supplied in the school environment – tuckshops, vending machines, school excursions, school camps, fundraising, classroom rewards, school events such as celebrations and sports days, and food used in curriculum activities.
- Foods and drinks have been classified into three categories according to their nutritional value:
  - Green: Encourage and promote these foods and drinks in the school;
  - Amber: Do not let these foods and drinks dominate choices and avoid large serve sizes;
  - Red: Limit the availability of these foods and drinks to no more than two occasions per term.
- The Smart Choices Ready Reckoner categorises commonly supplied foods and beverages according to the traffic light scheme ([ref](#)). In early 2016, the guidelines were updated with changes to some red and amber foods to better align with the National Healthy School Canteen Guidelines and the Australian Dietary Guidelines. For example, all drinks other than water, milk (plain and flavoured) and at least 99% fruit or vegetable juice are classified as 'red'.
- Implementation of Smart Choices is managed at the local level and principals are responsible for ensuring adherence to the Smart Choices strategy at their school.
- The policy environment is continuously monitored and key updates are made when key resources upon which the strategy is based (e.g. Australian Dietary Guidelines (2013), The Australian Guide to Healthy Eating) are updated, or when the departmental policy requirements change.

## ST\_PROV2 Healthy food policies in health services (visitors and staff)

### *Good practice statement*

The government ensures implementation of clear, consistent policies to provide and promote healthy food choices for visitors and staff in health service settings, inclusive of all food service activities (canteens, food at events, fundraising, promotions, vending machines etc.)

### Definitions and scope

- Includes government-owned, funded health services inclusive of all food service activities (canteens, food at events, fundraising, promotions, vending machines etc.)
- Includes private businesses that are under contract by the government to provide food
- Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices
- Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier
- Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol)
- Includes modifying ingredients to make foods and drinks healthier, or changing the menu to offer healthier options

### Policy details (to 30 June 2021)

#### *Health services: visitors (and staff)*

- The [A Better Choice: Healthy Food and Drink Supply Strategy for Queensland Health Facilities](#) was updated in 2019. *A Better Choice* applies in any outlet, setting or situation where food and/or drinks are sold, provided, promoted and advertised to staff and visitors. This includes outlets—including, but not limited to:
  - Retail—restaurants, cafes, cafeterias, kiosks, staff canteens, convenience stores, newsagents, post offices, florists, gift stores and pharmacies.
  - Vending machines.
  - Other—coffee carts, tea trolleys, staff social clubs and private selling within the workplace.
  - Catering—provided or purchased by Queensland Health or external agencies for meetings, events, workshops, training and any other functions.
  - Fundraising, promotional and sponsorship activities such as gifts, raffles, fundraising BBQs, bake sales, cake stalls, competitions and giveaways.
- All food and drinks, whether freshly made on the premises, prepared off-site or supplied pre-packaged, are within scope.
- The strategy uses a traffic light system to categorise foods based on alignment with the Australian Dietary Guidelines and classifies food and drinks according to their nutritional value as:
  - GREEN: Best nutritional value—choose mostly
  - AMBER: Some nutritional value—choose carefully
  - RED: Limited or no nutritional value—choose rarely.
- A new Health Service Directive Healthier drinks at healthcare facilities (the Directive) was released in 2019, mandating that unhealthy (RED) drinks must not be sold, and artificially sweetened (AMBER) drinks be limited to 20% of supply in Queensland Health facilities.
- After consultation with Hospital and Health Services, the [Directive](#) was updated to include food, effective from July 2020. The targets for food and drink provision are consistent with the [A Better Choice strategy](#). Annual reporting against the Directive is required.
- A summary of reporting results from the end of 2020 is as follows:
  - This was a ‘snapshot’ reporting with HHSs self-selecting which outlets to report (15 of 16 HHSs reported).

	<ul style="list-style-type: none"><li>- 3 HHSs achieved 100% compliance in both drinks and food.</li><li>- 8 out of 15 HHSs improved in drinks compliance from 2019 to 2020. 4 HHSs reported worse results.</li><li>- 1 HHS had 0% compliance in both drinks and food.</li><li>- 4 HHSs had 0% compliance in food.</li></ul> <ul style="list-style-type: none"><li>• Responsibility for implementation support and monitoring and reporting against the Directive was transferred to Health and Wellbeing Queensland in July 2021.</li><li>• As part of COAG Health Council Childhood Obesity project, five actions were undertaken to limit the impact of unhealthy food and drink on children under the following areas - health care, schools, children’s sport and recreation, food promotion, and food regulation.</li><li>• The Goals, principles and recommended nutritional standards for food and drink choices in public sector healthcare settings were endorsed by Health Ministers in August 2020. A Call to Action reinforcing the public healthcare sector’s leadership role accompanies the standards, and an FAQ document provides further information. These documents can be found in the Childhood Obesity section on the Health Council website (<a href="#">ref</a>).</li></ul>
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## ST\_PROV3 Healthy food policies in care settings (resident/in-patient food provision)

### *Good practice statement*

The government ensures implementation of clear, consistent policies to provide and promote healthy food choices in health services, aged, disability, custodial and community care settings (resident/in-patient food provision)

### **Definitions and scope**

- Include government-funded or managed services where the government is responsible for the provision of food, including public hospitals and other in-patient health services (acute and sub-acute, including mental health services), residential care homes, aged and disability care settings, custodial care facilities, prisons and home/community care services
- Includes private businesses that are under contract by the government to provide food
- Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices
- Includes modifying ingredients to make foods and drinks healthier, or changing the menu to offer healthier options

### **Context**

#### *National Standards – Health services*

- The Australasian Commission on Safety and Quality in Health Care (the Commission) is responsible for maintaining and implementing the National Safety and Quality Health Service (NSQHS) Standards (64). They outline the broad, minimum standards required for accreditation; the purpose is not to prescribe the specific best practice.
- The Standards provide a nationally consistent and uniform set of measures of safety and quality for application across a wide variety of health care services. They provide a quality assurance mechanism that tests whether relevant systems are in place to ensure minimum standards of safety and quality are met.
- Action 5.27 relates to nutrition and hydration to ensure that health service organisations that admit patients overnight has systems for the preparation and distribution of food and fluids that include nutrition care plans based on current evidence and best practice ([ref](#)).
- Action 5.28 relates to nutrition and hydration to meet patients' nutritional needs and requirements; monitor the nutritional care of patients at risk; identify, and provide access to, nutritional support for patients who cannot meet either nutritional requirements with food alone; and support patients who require assistance with eating and drinking ([ref](#)).

#### *National Standards – Aged, disability and community care services*

- The Department of Health is responsible for the development of quality standards for aged care including home care, home support, flexible care and residential services. The Australian Aged Care Quality Agency is responsible for assessing aged care services against the Accreditation Standards.

#### *National Standards – Prison and custodial facilities*

- Australian prisons, youth detention and custody/remand facilities are operated by the relevant State/Territory departments or bodies. Standard Guidelines for Corrections in Australia were published by the Australian Institute of Criminology (updated in 2012) and endorsed by all States and Territories ([ref](#)).

	<ul style="list-style-type: none"> <li>The Australasian Juvenile Justice Administrators ‘Juvenile Justice Standards 2009’ have been developed to support jurisdictions to deliver services in accordance with the relevant jurisdictional legislation (<a href="#">ref</a>). These standards are broadly used by jurisdictions to monitor service quality and performance.</li> </ul>
<p><b>Policy details (to 30 June 2021)</b></p>	<p><i>Health services, aged, disability and community care (in-patient food provision)</i>  <a href="#">Queensland Health Nutrition Standards for Meals and Menus (NSMM)</a></p> <ul style="list-style-type: none"> <li>An accredited practising dietitian (accredited by Dietitians Australia) is available to assess the food and menus in Queensland Health Services as meeting the NSMM and the requirements (cultural, religious, age, psychosocial, nutritional status) of the population in the facility.</li> <li>For the purpose of accreditation, all Queensland Health Services must be able to demonstrate compliance with the National Safety and Quality Health Service (NSQHS) Standards, specifically Std. 5.28.</li> <li>The Queensland Health NSMM (<a href="#">ref</a>) provides a framework to support meeting the nutritional requirements of the majority of patients, residents, consumers and clients taking into account length of stay, age, nutritional status and type of facility. The NSMM apply to the following patient groups: <ul style="list-style-type: none"> <li>Acute adult</li> <li>Maternity</li> <li>Paediatrics</li> <li>Residential aged care</li> <li>Mental health and acquired brain injury</li> <li>Special diets including vegetarian/vegan and therapeutic and medical diets</li> </ul> </li> <li>In 2018, the following sections of the NSMM were updated: <ul style="list-style-type: none"> <li>Nutrition Standards for Meal Components,</li> <li>Aged Care &amp; Mental Health were combined so that Residential Care Menu Standards aligned with current research, and</li> <li>Major update to Paediatric Menu Standards to reflect different age group requirements.</li> </ul> </li> </ul> <p><i>Prisons and custodial care</i>  <a href="#">Food and nutrition policy and implementation plan</a>  In 2021, Queensland Corrective Services (QCS) published <a href="#">a Custodial Operations Practice Directive – Health – Food and Nutrition:</a></p> <ul style="list-style-type: none"> <li>The outcomes of the directive are the following: <ul style="list-style-type: none"> <li>Establishes the requirement for corrective services facilities to implement the Statewide Prisoner Menu</li> <li>The development of a food safety program, which documents a risk management approach to identify the food safety hazards specific to a corrective services facility, and describes the processes and systems used to monitor and control these hazards and the corrective actions taken when hazards are identified.</li> <li>The establishment of a governance system that ensures effective and efficient compliance with best practice standards and relevant legislation.</li> </ul> </li> <li>An Operation Oversight Committee is to provide governance for the provision of nutritious and safe food for staff and offenders.</li> <li>A review of the Statewide Prisoner Menu is to be undertaken every two years in consultation with an accredited practicing dietitian.</li> <li>Notification of alternative food provision for clinical reasons is to be approved in writing by Queensland Health.</li> </ul>

## ST\_PROV4 Healthy food policies in public sector workplaces

### *Good practice statement*

The government ensures implementation of clear, consistent policies to provide and promote healthy food choices in public sector workplaces

### **Definitions and scope**

- The focus of this indicator is public sector workplaces (excluding schools, hospitals, healthcare facilities etc that are covered in other indicators):
- Includes private businesses that are under contract by the government to provide food in public sector workplaces
- Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices
- Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier
- Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol)
- Includes modifying ingredients to make foods and drinks healthier, or changing the menu to offer healthier options

### **Policy details (to 30 June 2021)**

#### *Be healthy, be safe, be well framework*

- The Queensland Government's [Be healthy, be safe, be well Framework](#) provides an integrated and proactive approach to health, safety, and wellbeing across the Queensland public sector. The framework identifies four organisational levers that can improve health, safety and wellbeing outcomes in agencies. One of the four organisational levers identified, [Work Environment](#), provides links to Queensland and Commonwealth government websites with further nutrition information. An in-depth review is underway and the report will be available in June 2022.

#### *A Better Choice – Healthy Food and Drink Supply Strategy*

- The [strategy](#) was released in 2019 and aims to improve the availability and promotion of healthier food and drinks in Queensland government facilities and workplaces.
- Awareness of the strategy was promoted through whole-of-government networks and communication channels.
- Data on agency implementation of the strategy is not available.

#### *Healthier Workplaces*

- Healthy Workplaces is HWQld's approach to addressing the growing need for worker and workplace wellbeing at a local and system level.
- HWQld's internal policies and practices aim to improve the culture and wellbeing of staff and provide an exemplar to external agencies seeking advice and strategies. Policies and practices include flexible work arrangements, a health promoting kitchen, weekly fruit boxes and standing desks.
- HWQld's external strategies involve cross-sector collaborations that identify, co-develop and advocate for contemporary best practice workforce initiatives for Queensland workplaces. The aim is to support the growing need for health and wellbeing support, and to strategically influence cross-system change.

## ST\_PROV5 Healthy food policies in community settings

### *Good practice statement*

The government ensures implementation of clear, consistent policies to provide and promote healthy food choices in community settings and events that are government-owned, funded or managed

### **Definitions and scope**

- Includes food relief programs, sport and recreation facilities, parks, community events (government-owned, funded or managed)
- Excludes 'public settings' that are not funded or managed by the government
- Excludes school and early childhood settings (see ST\_PROV1)
- Excludes health services (visitors and staff) (see ST\_PROV2)
- Excludes in care settings (resident/in-patient food provision) (see St\_PROV3)
- Excludes public sector workplaces (see (ST\_PROV4)
- Includes policies and nutrition standards to provide and promote healthy food choices or to limit or restrict the provision or promotion of unhealthy food choices
- Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier
- Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol)
- Includes modifying ingredients to make foods and drinks more healthy, or changing the menu to offer more healthy options

### **Policy details (to 30 June 2021)**

- Sport and recreation facilities, parks, community events (government-owned, funded or managed)*
- Stadiums Queensland has worked with its caterers to increase variety of food and beverages, including healthy options. Fresh and healthy options are available at each of Stadiums Queensland's nine operating venues.
  - The Department of Tourism, Innovation and Sport (DTIS) owned and operated Sport and Recreation venues have implemented the Queensland Health sugary drink guidelines and the two Recreation Centres contract caterers have designed menus to meet the [A Better Choice](#) guidelines. This is required as part of the catering contract. Venues have also limited vending machines and the sales of sugary drinks within venues.
  - DTIS has included a requirement for State level organisations receiving funding through DTIS' Active Industry Fund to implement plans for promotion of healthy food and drink at its events and at sporting facilities.

## ST\_PROV6 Support and training systems for public sector settings

### *Good practice statement*

The government ensures that there are good support and training systems to help schools, health services, other public sector organisations and their service providers/vendors to meet healthy food service policies and guidelines

### **Definitions and scope**

- Includes support for schools, early childhood education services, hospitals and health settings, other public sector organisations and their service providers
- Support and training systems include guidelines, toolkits, templates (e.g. policy/guidelines or contracts), recipes and menu planning tools, expert advice, menu and product assessments, online training modules, cook/caterer/other food service staff information and training workshops or courses

### **Policy details (to 30 June 2021)**

#### *Support for public sector workplaces*

- Workplace Health and Safety Queensland deliver workplace health, safety and wellbeing initiatives to Queensland workplaces. These initiatives aim to support workplaces to make policy, cultural and physical environment change that promote healthy lifestyles. A multi-strategic model using evidence-based interventions, including targeted strategies (e.g. industry specific) and universal strategies (e.g. website, workplace recognition scheme), to support best practice workplace health promotion programs and policies.
- Workplace Health and Safety Queensland integrate [health and wellbeing](#) with the work of the health and safety regulator. Health, safety and wellbeing are included in the Workplace Health and Safety Queensland's Healthcare and Social Assistance strategy and in the Injury Prevention and Management program's workplace audit tool.
- Other examples of embedding health, safety and wellbeing into systems include targeting peak industry bodies, member organisations and the Queensland Public Sector. Influencing these high-level stakeholders will facilitate the adoption of healthy food environments in workplaces by facilitating integrated systems that will support sustainable workplace-based initiatives.
- Specific cross sector activities include facilitation of the Workplace Health Network (WHN) representing 20 of the 21 Government Departments continues and currently supports implementation of the Queensland Government [Be healthy, be safe, be well framework](#).

#### *Support for Queensland Health Facilities*

- The Department of Health provided three rounds of funding to Hospital and Health Services over 2017 - 2020 to facilitate the implementation of healthier food and drinks in healthcare facilities. In addition, a state-wide project coordinator position has been funded in Statewide Foodservices to provide a central point of contact for implementation and monitoring support. This position coordinates the development of resources, communication, and training for HHSs, and coordinates student projects to facilitate implementation, auditing, and reporting.
- The Department of Health purchased Queensland Health user licences for the Victorian food and drinks classification tool, FoodChecker, to assist with food and drink assessment. The Victorian Healthy Eating Advisory Service (HEAS) has also been engaged to provide FoodChecker related support services. Further adaptation of the tools has been funded to improve Queensland users' experience with FoodChecker.

### *Support for Schools*

- A [resource package](#) is available to support implementation of the *Smart Choices – Healthy Food and Drink Supply Strategy for Queensland Schools*, which includes a Food and Drink Selector, [‘Occasional’ Food and Drink Criteria](#) table, [Food and Drink Spectrum](#) (a visual guide that shows where specific foods and drinks fall on a scale of healthiness) and a PowerPoint presentation.
- Other resources include parent information sheets, [fact sheets](#) and an implementation [toolkit](#).
- The Department of Education has an [online training program](#) with three modules that cover essential components of the Smart Choices strategy. It can be accessed at any time for new or existing tuckshop staff, volunteers, parents and teachers.
- Other online resources include workshops and masterclasses.

### *Healthy tuckshop support program*

- In 2020, funding for the Healthy Tuckshop Support Program was transferred from the Queensland Department of Health to Health and Wellbeing Queensland.
- The Healthy Tuckshop Support Program provides support to government and non-government schools to implement and maintain the Smart Choices: Healthy Food and Drink Supply Strategy for Queensland Schools.
- Following an independent panel review in 2021, a new three-year contract has been negotiated with Queensland Association of School Tuckshops (QAST) to deliver the Healthy Tuckshop Support Program, with additional deliverables and increased funding.
- The program provides a range of support services including face to face and online networking opportunities, healthy recipe and menu planning tools, and electronic communications.
- Five online knowledge exchange sessions were held in 2021 using the Project ECHO® platform. Tuckshop convenors from across Queensland discussed how to make sustainable and nutritious changes to tuckshop menus in line with *Smart Choices – healthy food and drink supply strategy*.
- 311 school tuckshop menu health checks were completed between 2019-21, and an audience of almost 500,000 reached through online and social media activities.

## Policy area: Food Retail

Good practice statement for this domain: The government implements policies and programs to support the availability of healthy foods and limit the availability of unhealthy foods in communities (e.g food retail outlet density and locations) and in-store (product placement)

### Indicators in this domain by level of government:

Policy area: Food retail		
National	Federal	State/Territory
	AUD_RETAIL1: Remote retail store availability of healthy and unhealthy food	ST_RETAIL1: Planning policies: unhealthy food retail outlets
	AUD_RETAIL2: Availability of foods in food service outlets	ST_RETAIL2: Planning policies: healthy food retail outlets
	AUD_RETAIL3: Restriction of marketing of unhealthy food in retail outlets	ST_RETAIL3: Remote retail store availability of healthy and unhealthy foods
		ST_RETAIL4: Availability of foods in food service outlets
		ST_RETAIL5: Restriction of marketing of unhealthy food in retail outlets

**Details on State/Territory-level indicators in this domain:**

<p><b>ST_RETAIL1</b> Planning policies: unhealthy food retail outlets</p>	
<p><i>Good practice statement</i>            Planning frameworks enable the government to place limits on the density or placement of outlets selling mainly unhealthy foods by making community health and wellbeing an enforceable objective of the planning system</p>	
<p><b>Definitions and scope</b></p>	<ul style="list-style-type: none"> <li>• Includes the consideration of public health in relevant Planning Acts that guide the policies, priorities and objectives to be implemented at the local government level through their planning schemes</li> <li>• Includes the consideration of public health in State/Territory subordinate planning instruments and policies</li> <li>• Includes a State/Territory guideline that sets the policy objective of considering public health when reviewing and approving food outlet planning applications</li> <li>• Excludes laws, policies or actions of local governments</li> </ul>
<p><b>Context</b></p>	<p><i>National context</i></p> <ul style="list-style-type: none"> <li>• In Australia, planning is a shared responsibility between state and local governments. Although there is variation in the planning policy approach, in general, state governments set overarching planning legislation and policy frameworks and standards and local governments are responsible for developing and implementing more specific municipal policies and schemes in line with these and considering planning applications.</li> </ul>
<p><b>Policy details (to 30 June 2021)</b></p>	<p><i>Healthy People, Healthy Places</i></p> <ul style="list-style-type: none"> <li>• Queensland Health and the Office of the Queensland Government Architect is leading a whole of government initiative to integrate health outcome considerations in urban design and planning processes. The <i>Healthy Places, Healthy People</i> framework was developed through this collaborative initiative and identifies three key principles 'Connected, Welcoming and Responsible' and brings together nine associated built and natural environment attributes proven to support healthy and active living. The framework provides a robust mechanism to support cross agency partners to consider and integrate health outcome considerations into their policy, planning and infrastructure investment decisions relating to built and natural environment design.</li> <li>• An additional focus under the <i>Healthy Places, Healthy People</i> initiative has been to establish and measure Queensland specific healthy place indicators. It is proposed that having Queensland indicators to measure and monitor the health of place will provide government agencies with specific and well-aligned evidence to inform further policy, planning and investment directions. Given synergies with government policy and planning priorities, strong evidence base and data availability, the initial scope for identifying indicators has focused on built and natural environment attributes that support active living.</li> </ul>



## ST\_RETAIL2 Planning policies: healthy food retail outlets

### *Good practice statement*

Zoning laws and related policies are implemented to encourage the availability of health food retail outlets (e.g those selling mainly fresh fruit and vegetables) and/or access to these outlets (e.g. opening hours, frequency)

### **Definitions and scope**

- Healthy food retail outlets include produce markets, farmers' markets, greengrocers, food co-operatives
- Includes fixed or mobile outlets
- Excludes community gardens, edible urban or backyard gardens (usually regulated by local governments)
- Includes State/Territory policies to streamline and standardise planning approval processes or reduce regulatory burdens for these outlets
- Includes policies that support local governments to reduce license or permit requirements or fees to encourage the establishment of such outlets
- Includes the provision of financial grants or subsidies to outlets
- Excludes general guidelines on how to establishment and promote certain outlets
- Excludes laws, policies or actions of local governments

### **Context**

- In Australia, planning is a shared responsibility between state and local governments. Although there is variation in the planning policy approach, in general, state governments set overarching planning legislation and policy frameworks and standards and local governments are responsible for developing and implementing more specific municipal policies and schemes in line with these and considering planning applications.

### *Farmers' markets*

- In general, farmers' markets require approvals and permits from local councils, which will involve an application to assess issues such as use of public land, traffic and parking, amenities. There are ways that local governments could support the establishment and promote farmers' markets such as securing appropriate sites on a regular basis, waiving site fees, supporting the permit application processes, supporting marketing and engaging other community stakeholders (9).

### **Policy details (to 30 June 2021)**

See ST\_RETAIL1

## ST\_RETAIL3 Remote retail store availability of healthy and unhealthy foods

### *Good practice statement*

The government ensures support systems are in place to encourage remote food stores to promote the in-store availability of healthy foods and to limit the in-store availability of unhealthy foods

### **Definitions and scope**

- Remote food stores include supermarkets, convenience stores (including 'general stores' or 'milk bars'), greengrocers and other speciality food retail outlets in remote areas
- Support systems include guidelines, resources or expert support
- In-store promotion includes the use of key promotional sites such as end-of-aisle displays, checkouts and island bins as well as the use of shelf signage, floor decals or other promotional methods
- In-store availability includes reducing or increasing supply (volume) of a product such as reducing the amount of shelf-space dedicated to sugar-sweetened drinks and confectionary, or offering fresh produce in a convenience store

### **Policy details (to 30 June 2021)**

#### *Pilot to reduce sugary drink consumption*

- In 2019 an 18-month pilot project partnered with three Aboriginal and Torres Strait Islander Shire Councils to create healthy places in communities to reduce sugary drink consumption was underway.
- The project focussed on engagement with Mayors, Councillors, Traditional Owners and Elders, community organisations and community members to develop appropriate local strategies for implementation.
- Strategies included the development of a local social marketing campaign and the installation of water bubblers.
- Community stores also made changes to support healthy drink choices such as placing water only fridges near the store's entrance and selling water at cost price. In one store, data indicated a small, but statistically significant increase in water sales and a similar decrease in soft drink and other sugary drink sales.

#### *Healthy Stores Project 2021 -2024*

- Health and Wellbeing Queensland aims to stimulate intersectoral action by tackling the determinants that influence the dimensions food security of remote First Nations communities in Queensland.
- This includes working with communities, stores groups, government, non-government organisations, the Aboriginal and Torres Strait Islander Community Controlled Health sector, universities, and businesses to improve food security.
- HWQld is partnering with Community Enterprise Queensland (CEQ) and the Aboriginal and Torres Strait Islander Community Controlled sector to deliver the Healthy Stores project.
- The Healthy Stores project is engaging CEQ store managers and staff to improve in-store environments using the four principles of marketing and promotion (product, price, placement and promotion) to support healthy food and drink purchasing behaviour of customers. This work builds on the [Healthy Stores 2020 study](#) which was a partnership between The Arnhem Land Progress Aboriginal Corporation (ALPA), and a team of researchers led by Associate Professor Julie Brimblecombe.
- HWQld is supporting CEQ with capacity and skills to implement the Healthy Stores 2020 Policy Action series, developed to support remote retailers to inform their own store nutrition policies and adopt healthier retail strategies.

	<ul style="list-style-type: none"><li>• The Healthy Stores project will train health staff supporting implementation to increase the chance of success. In-store healthy food and drink activities will also be delivered in partnership with the Aboriginal and Torres Strait Islander Community Controlled sector servicing these communities.</li><li>• HWQld are collaborating with the lead researchers from the Healthy Stores 2020 work from Monash University, University of Queensland, and (Menzies School of Health Research) to measure the impact of the project.</li></ul>
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## ST\_RETAIL4 Availability of foods in food service outlets

### *Good practice statement*

The government ensures support systems are in place to encourage food service outlets to increase the promotion and availability of healthy foods and to decrease the promotion and availability of unhealthy foods

### **Definitions and scope**

- For this indicator, food service outlets include for-profit quick service restaurants, eat-in or take-away restaurants, pubs, clubs
- Support systems include guidelines, resources or expert support
- Includes settings such as train stations, venues, facilities or events frequented by the public
- Excludes settings owned or managed by the government (see ST\_PROV2-ST\_PROV5)
- Includes the strategic placement of foods and beverages in cabinets, fridges, on shelves or near the cashier
- Includes the use of signage to highlight healthy options or endorsements (such as traffic lights or a recognised healthy symbol)
- Includes modifying ingredients to make foods and drinks more healthy, or changing the menu to offer more healthy options

### **Policy details (to 30 June 2021)**

#### *Good Sports Program*

- Funded by the Queensland Government and delivered by the Australian Alcohol and Drug Foundation, the Good Sports Program provides resources and training to help sports clubs tackle a range of issues including healthy eating.
- The Good Sports, Healthy Eating program works with clubs to develop a Healthy Eating Policy and focuses on the following areas ([ref](#)):
  - Safe food handling
  - Increasing the range of healthy food and drink options
  - Increasing the nutritional quality of food provided
  - Working with clubs on offering healthier food including recipes
  - Displaying and promoting healthy food and drink options
  - Healthy fundraising ideas
- The program follows the Queensland Government-approved Food for Sport guidelines ([ref](#)) and encourages clubs to implement these guidelines.
- More than 570 clubs participated in the program in 2019-20 and 514 in 2020-21 representing nearly 40 unique sporting codes.
- Nearly 190 new clubs were accredited in 2019-20 to level 2 or 3 (most advanced of the three levels) and 95 in 2020-21.
- The Queensland Food for Sport guidelines are being reviewed by Health and Wellbeing Queensland. Implementation mechanisms will be developed with partners.

#### *The Healthy Food Partnership*

- The Healthy Food Partnership (HFP) was established by the Commonwealth Government to improve the nutrition of Australians by supporting food reformulation, making healthier food choices easier and more accessible and by raising awareness of better food choices and portion sizes.
- In August 2016 a Food Service Working Group was established to develop actions that restaurants, cafes, sporting venues, pubs and clubs etc could implement to support dietary guidelines. The Queensland Department of Health contributed to the development of a scheme that was launched in 2019.

- Further details on the actions of the Food Service Working Group are assessed in the Federal Government policy document (AUD\_RETAIL2).

*Healthy Kids Menu Initiative*

- The Queensland Healthy Kids Menu (QHKM) initiative was introduced by Health and Wellbeing Queensland in 2020 to empower restaurants, cafes hotels, and clubs to offer healthier food and drinks to children.
- Businesses guidelines and supporting resources are available to support adoption by industry to offer healthier options on their menu for children, with a focus on increasing fruit and vegetables, reducing sugar and saturated fat and addressing the promotion of unhealthy food and drink items.
- Health and Wellbeing Queensland sponsored the Healthy Kids Menu category at the Restaurant and Catering Association's 2020 Hostplus Excellence Awards to recognise venues who are supporting the wellbeing of children. Health and Wellbeing Queensland is sponsoring the Award again in 2021.

## ST\_RETAIL5 Restriction of marketing of unhealthy food in retail outlets

### *Good practice statement*

Effective policies are implemented by the government to restrict the way unhealthy foods are marketed within supermarkets and other retail stores, including through restrictions on product placement in prominent in-store positions (such as checkouts and end-of-aisle displays), price discounts and sales to children

### **Definitions and scope**

- Includes mandatory policy (i.e. legislation or regulations) or voluntary standards, codes, guidelines set by government or by industry where the government plays a role in development, monitoring, enforcement or resolving complaints
- Includes restriction of volume promotional offers such as multi-buys “3 for 2”, “buy-one-get-one-free” offers, extra free promotions e.g. “50% extra free” and fixed price savings on unhealthy foods
- Includes restriction of product placement of unhealthy foods, e.g. at aisle ends, checkouts, store entrances and online equivalents
- Includes the restriction of unhealthy foods promoted through in-store advertisement directed at children

### **Policy details (to 30 June 2021)**

#### *Healthy Stores Project 2021 -2024*

- HWQld is partnering with Community Enterprise Queensland (CEQ) and the Aboriginal and Torres Strait Islander Community Controlled sector to deliver the Healthy Stores project in remote First Nations communities in Queensland.
- The Healthy Stores project is engaging CEQ store managers and staff to improve in-store environments using the four principles of marketing and promotion (product, price, placement and promotion) to support healthy food and drink purchasing behaviour of customers.
- Further details about the Healthy Stores Project are at ST\_RETAIL3

# INFRASTRUCTURE SUPPORT

Policy area: Leadership

Good practice statement for this domain: The political leadership ensures that there is strong support for the vision, planning, communication, implementation and evaluation of policies and actions to create healthy food environments, improve population nutrition, and reduce diet-related inequalities

Indicators in this domain by level of government:

Policy area: Leadership		
National	Federal	State/Territory
NAT_LEAD1: Government strategy for addressing nutrition and obesity	AUD_LEAD1: Political support for population nutrition	ST_LEAD1: Political support for population nutrition
NAT_LEAD2: Government taskforce dedicated to addressing nutrition and obesity	AUD_LEAD2: Population intake targets established	ST_LEAD2: Government strategy and related implementation plan for addressing nutrition and obesity
NAT_LEAD3: Comprehensive implementation plan linked to national needs	AUD_LEAD3: Evidence-based dietary guidelines implemented	

## Details on State/Territory-level indicators in this domain:

<b>ST_LEAD1 Political support for population nutrition</b>	
<p><i>Good practice statement</i></p> <p>There is strong, visible, political support (at the Head of State/Cabinet level) for improving food environments, population nutrition, diet-related NCDs and their related inequalities</p>	
<b>Definitions and scope</b>	<ul style="list-style-type: none"> <li>• Visible support includes statements of intent, election commitments, budget commitments, establishing priorities and targets, demonstration of support in the media</li> <li>• Documents that contain evidence of strong political support include media releases, speeches, pre-election policy papers, introduction of a bill, State-level strategic plans with targets or key performance indicators</li> <li>• Head of State is the Premier or the Chief Minister</li> <li>• Excludes health-specific strategic plans (covered in ST_LEAD2 below)</li> </ul>
<b>Policy details (to 30 June 2021)</b>	<p><i>Queensland Health Promotion Agency</i></p> <ul style="list-style-type: none"> <li>• During the 2017 State election, the Queensland Government committed to establishing a statutory public health commission to tackle Queensland's high obesity and chronic disease rates by supporting children, young people and families to adopt a healthy lifestyle. Following the 2017 State election, the Government has maintained their commitment to rebuild preventive health and health promotion capacity through the establishment of a state-wide health promotion agency, and by supporting practical programs of proven effectiveness to assist everyone in our communities to live a long, healthy life without the threat of chronic illnesses such as diabetes, heart disease and cancer.</li> <li>• In response to the election commitment to establish a state-wide health promotion agency, Health and Wellbeing Queensland (HWQld) was established by an Act of Parliament in July 2019 (<a href="#">ref</a>, <a href="#">ref</a>). HWQld is a prevention agency with a focus on obesity prevention targeting three key areas: nutrition, physical activity and wellbeing.</li> <li>• The Ministerial Charter letter for the Honourable Yvette D'Ath, Minister for Health and Ambulance Services outlines the following commitments and priorities in relation to prevention (<a href="#">ref</a>):             <ul style="list-style-type: none"> <li>- Continue to oversee Health and Wellbeing Queensland, and support delivery of their Strategic Plan to achieve real and measurable improvements in the health and wellbeing of Queenslanders.</li> </ul> </li> </ul> <p><i>Diet-related NCDs and Obesity prevention</i></p> <ul style="list-style-type: none"> <li>• The now previous Health Minister Steven Miles made several strong speeches about obesity prevention during his time as Health Minister, citing commitments to improve the Queensland food environment. See <a href="#">ref</a> and <a href="#">ref</a> for examples.</li> <li>• The Queensland Government's Strategic Plan 2019-2023 (<a href="#">ref</a>) included a priority to Keep Queenslanders healthy under Our Future State: Advancing Queensland's Priorities. Groups of Deputy Directors-General were established as the driving force and the priority had targets (including for obesity rate reduction) and a Roadmap that outlined actions achievable in six to twelve months.</li> <li>• During the 2020 State election, the Queensland Government committed \$265 million to build seven satellite hospitals in Southeast Queensland whose role will include care co-ordination, remote monitoring and patient literacy services for diet-related NCDs. A student wellbeing package of \$96 million to employ 464 additional health and well-being professionals in every primary and secondary state school was also announced. These professionals will play a role in preventing diet-related NCDs.</li> </ul>



ST\_LEAD2 Government strategy and related implementation plan for addressing nutrition and obesity

*Good practice statement*

There is a long-term government strategy for addressing diet, nutrition, obesity and related NCDs, including prioritisation for reducing inequalities and protecting vulnerable populations. There is also a corresponding comprehensive, transparent, adequately resourced implementation plan, with annual performance and process targets, linked to state/national needs and priorities.

**Definitions and scope**

- The focus of this indicator is State/Territory specific strategies and plans. Federal and National strategies and plans are covered by other indicators.
- Frameworks strategies or implementation plans specify aims, objectives or targets for addressing diet, nutrition, obesity and NCDs and to reduce inequalities and protecting vulnerable populations including taking a preventive approach that addresses the social and environmental determinants of health
- Includes specific priorities for reducing inequalities for specific population groups
- Excludes priorities to reduce inequalities in secondary or tertiary prevention
- Implementation plans should be current (i.e. maintain endorsement by the current government and/or are being reported against)
- Plans should refer to actions to improve food environments (as defined in the policy domains above) and should include both policy and program strategies

**Context**

*National Strategic Framework for Chronic Conditions*

The National Strategic Framework for Chronic Conditions was published in August 2019. The framework is directed at decision and policy makers at national, state and local levels; and provides guidance for those developing and implementing policies, strategies and actions.

The Framework considers shared health determinants, risk factors and multimorbidities across a broad range of chronic conditions and provide national direction for improving chronic disease prevention and care across Australia.

The Framework moves away from a disease specific approach by recognising that there are often similar underlying principles for the prevention and management of many chronic conditions ([ref](#)).

*National preventive health strategy*

In 2019 the Australian Government announced that it would develop a National Preventive Health Strategy. The strategy aims to help Australians improve their health at all stages of life and is a 10-year long-term plan. The consultation for the draft strategy closed 19 April 2021 ([ref](#)).

*National obesity strategy*

The Australian Government is currently working with states and territories to develop a National Obesity Strategy. Results from a national public consultation on a proposed framework and ideas to be included in a national obesity strategy report was released November 2020. A final draft strategy is due to be considered by Health Ministers in early 2021 ([ref](#)).

	<p><i>Aboriginal health: Commonwealth and State Government context</i></p> <p>The Council of Australian Governments (COAG) established the National Indigenous Reform Agreement (NIRA) in 2008 and committed to a range of targets to Close The Gap in Indigenous disadvantage, including two targets specifically related to health. Underpinning NIRA are a series of national Health Plans for priority health areas including chronic disease, mental health, and social and emotional wellbeing.</p> <p><i>National Aboriginal and Torres Strait Islander Health Performance Framework report</i></p> <p>The Aboriginal and Torres Strait Islander Health Performance Framework monitors progress in Indigenous Australian health outcomes, health system performance and broader determinants of health (<a href="#">ref</a>).</p> <p><i>The People of Australia – Australia’s Multicultural Policy</i></p> <p>Australia’s multicultural policy acknowledges that government services and programs must be responsive to the needs of our culturally diverse communities. It commits to an access and equity framework to ensure that the onus is on government to provide equitable services to Australians from all backgrounds. The policy aims to strengthen social cohesion through promoting belonging, respecting diversity and fostering engagement with Australian values, identity and citizenship, within the framework of Australian law. (<a href="#">ref</a>)</p>
<p><b>Policy details (to 30 June 2021)</b></p>	<p><i>Health and Wellbeing Queensland Strategic Plan 2020-2024</i></p> <ul style="list-style-type: none"> <li>• The Health and Wellbeing Queensland Strategic Plan 2020-2024 sets the direction and priority areas to achieve the vision that every Queenslanders achieves and sustains a healthier weight by moving more and making healthier food and drink choices.</li> <li>• The plan commits to equity encompassing and infiltrating all strategies and to addressing the underlying social determinants of health for people living with disadvantage or disability, regional and remote communities, culturally and linguistically diverse communities and First Nations people. It also aims to improve the availability, accessibility and acceptability of healthy food options, especially in remote areas.</li> <li>• The three strategic pillars are: <ul style="list-style-type: none"> <li>- Population: focused on creating environments that support healthier options at all stages of life and for priority populations.</li> <li>- Prevention: empower and activate people, organisations, communities and governments to create the conditions that will prevent people from getting ill in the first place and keep them healthy.</li> </ul> </li> </ul> <p>Partnership: support health promotion activity, capacity and direction of partners by providing access to resources and expertise to scale-up and leverage evidence-informed and innovative approaches.</p> <p><i>Queensland Obesity Prevention Strategy and Action Plan</i></p> <ul style="list-style-type: none"> <li>- Health and Wellbeing Queensland is progressing with the development of a 10-year statewide obesity prevention Strategy and Action plan, in advance of the finalisation and release of the National Obesity Prevention Strategy. This is imperative due to the urgency of the obesity crisis which has been greatly impacted by COVID-19, and to leverage the opportunities to support creation of health and wellbeing legacy initiatives for the Brisbane 2032 Olympics and Paralympics.</li> </ul>

- HWQld will lead the way in developing a collaborative, co-designed plan to guide the Queensland government and other key stakeholders to take actions to reverse the rising obesity rates

*Queensland Department of Health Strategic Plan 2021-2025*

- The Queensland Department of Health Strategic Plan 2021-2025 is a core planning document for the department and outlines the strategies to support the health and wellbeing of all Queenslanders ([ref](#)). The 6 objectives include:
  - Protect the health of all Queenslanders through effectively planned and timely responses to system-wide threats
  - Effective partnerships with Primary care and Queensland Ambulance Service to drive co-designed models of care. Strategy 2.2 supports the creation of a public health and prevention clinical network. Clinical networks serve as an independent point of reference, for clinicians, Hospital and Health services and the Department of Health. The statewide clinical networks guide quality improvement reform and support clinical policy development, emphasizing evidence-based practice and clinical consensus to guide implementation, optimisation and provision of high quality patient focussed health care.
  - Support and advance our workforce
  - Advance Health Equity for First Nations people
  - Health reform that plans for a sustainable future. Performance indicator: 5.1 Chronic health outcomes in Queensland
  - Interconnected system governance that delivers the building blocks to support Hospital and Health Services

*Prevention Strategic Framework 2017-26*

- The [Prevention Strategic Framework 2017 to 2026](#) sets a pathway for reducing chronic diseases and improving health for all Queenslanders. Priority areas are healthy weight, smoking prevention, and skin cancer prevention. One of two key objectives is: 'Healthy places – creating healthier environments where we live, learn, work and play to help people make healthier choices.
- Six integrated strategy areas below are evidence-based. Under these strategies, universal actions to reach all people, and targeted actions for groups and/or settings work together for sustainable population-wide behaviour changes:
  - Public policy and legislation – creating environments that make it easier to lead healthy lives
  - Sector development – supporting sectors to integrate prevention into their business
  - Social marketing – raising awareness, motivating and influencing healthy behaviours
  - Personal skills development – empowering people with the skills and knowledge to make healthy choices
  - Risk assessment, early intervention and counselling – identifying and helping people at greater risk to take early action to improve their health
  - Health surveillance and research – providing timely and robust information to inform policy and practice.
- Leadership of smoking prevention, skin cancer prevention, certain food and nutrition policy advice, strategy governance and evaluation is provided by Prevention Division, Queensland Health. Leadership of obesity prevention and improved healthy weight outcomes is provided by Health and Wellbeing Queensland.

## Policy area: Governance

Good practice statement for this domain: Governments have structures in place to ensure transparency and accountability, and encourage broad community participation and inclusion when formulating and implementing policies and actions to create healthy food environments, improve population nutrition, and reduce diet-related inequalities

### Indicators in this domain by level of government:

Policy area: Governance		
National	Federal	State/Territory
	AUD_GOVER1: Restricting commercial influence on policy development	ST_GOVER1: Restricting commercial influence on policy development
	AUD_GOVER2: Transparency in the development of food and nutrition policies	ST_GOVER2: Transparency in the development of food and nutrition policies
	AUD_GOVER3: Assessing the potential health impacts of all policies	ST_GOVER3: Assessing the potential health impacts of all policies
	AUD_GOVER4: Government workforce to support public health nutrition	ST_GOVER4: Government workforce to support public health nutrition
	AUD_GOVER5: Independent health promotion agency	ST_GOVER5: Independent health promotion agency

## Details on State/Territory-level indicators in this domain:

<h3>ST_GOVER1 Restricting commercial influence on policy development</h3>	
<p><i>Good practice statement</i></p> <p>There are robust procedures to restrict commercial influences (where they have conflicts of interest with improving population nutrition) on the development of policies related to food environments</p>	
<p><b>Definitions and scope</b></p>	<ul style="list-style-type: none"> <li>• Includes government policies, guidelines, codes of conduct or other mechanisms to guide actions and decision-making by government employees, for example conflict of interest declaration procedures</li> <li>• Includes procedures to manage partnerships with private companies or peak bodies representing industries that are consulted for the purpose of developing policy, for example committee procedural guidelines or terms of reference</li> <li>• Includes publicly available, up-to-date lobbyist registers that specify the lobbying activities</li> </ul>
<p><b>Policy details (to 30 June 2021)</b></p>	<p><i>Managing public sector employee conflict of interest</i></p> <p>A number of instruments stipulate the imperative for public sector employees to identify, disclose and manage actual or potential conflicts of interest that might interfere with their duties. This includes:</p> <p><i>Integrity Act 2009</i></p> <ul style="list-style-type: none"> <li>• Under the <i>Integrity Act 2009</i>, a conflict of interest involves a conflict or possible conflict between a person's personal interests and that person's official duties. Any conflict of interest must be resolved in favour of the public interest (<a href="#">ref</a>).</li> </ul> <p><i>Declaration of interests policy</i></p> <ul style="list-style-type: none"> <li>• The Public Service Commission Declaration of Interests policy applies to Senior Executive service and equivalent employees including statutory office holders (<a href="#">ref</a>).</li> </ul> <p><i>Code of Conduct</i></p> <ul style="list-style-type: none"> <li>• The whole-of-government Code of Conduct for Queensland Public Service that is set by the Department of the Premier and Cabinet includes a section on the identification and management of conflicts of interest among public sector employees (<a href="#">ref</a>).</li> </ul> <p><i>Lobbying</i></p> <p><i>Lobbyist register</i></p> <ul style="list-style-type: none"> <li>• <i>In 2009, the government established a regulatory system for lobbying. Through the Integrity Act 2009, it established a register of lobbyists and introduced a requirement for its Ministers, their advisors and public servants generally not to have dealings with unregistered lobbyists (<a href="#">ref</a>).</i></li> <li>• Lobbyists are required to comply with a Lobbyists Code of Conduct (<a href="#">ref</a>).</li> <li>• The Register was established to make publicly available significant details about professional lobbyists who represent a client's views to government representatives. It includes information such as (<a href="#">ref</a>):             <ul style="list-style-type: none"> <li>- <i>business registration details, including the names of owners, partners or major shareholders, as applicable</i></li> <li>- names and positions of persons employed, contracted or otherwise engaged by the lobbyist to carry out lobbying activities</li> <li>- the names of third parties for whom the lobbyist is currently retained to provide paid or unpaid services as a lobbyist</li> </ul> </li> </ul>

#### Register of lobbying contacts

- In addition to the Register of Lobbyists, the Lobbyists Code of Conduct includes a requirement for lobbyists to log their contact with government and opposition representatives. This information is submitted to the Integrity Commissioner and is available for public access. The required details are ([ref](#)):
  - date of meeting
  - title(s) and or name(s) of government or opposition representative(s)
  - name of the lobbyist entity
  - name of the client
  - purpose of the meeting (options being 'commercial-in-confidence' and 'other', with space to explain if other is chosen)
- This type of register does not exist in other jurisdictions.

#### Employee lobbyist disclosure

- The Queensland Public Service Commission also has a disclosure of previous employment as a lobbyist policy.

#### *Declaration of political donations*

- The Palaszczuk Government passed important legislation to improve the transparency of political donations.
- Election candidates must disclose the following within 15 weeks after polling day:
  - Total amount of gifts including fundraising contributions and gifts in kind received
  - Number of entities and persons who made contributions
  - Details of these entities and persons
- The gift threshold amount for the amount or value of a gift or loan, is \$1,000. To our knowledge this is the lowest reporting threshold in Australia.

## ST\_GOVER2 Transparency in the development of food and nutrition policies

### *Good practice statement*

Policies and procedures are implemented for ensuring transparency in the development of food and nutrition policies

#### **Definitions and scope**

- Includes policies or procedures to guide the online publishing of private sector and civil society submissions to government around the development of policy and subsequent government response to these
- Includes policies or procedures that guide the use of consultation in the development of food and nutrition policy
- Includes policies or procedures to guide the online publishing of relevant scoping papers, draft and final policies

#### **Context**

##### *National regulation reform*

In 2012, the Council of Australian Governments (COAG) agreed to a new regulatory and competition reform agenda: *National Compact on Regulatory and Competition Reform: Productivity Enhancing Reforms for a More Competitive Australia* (the Compact). The Compact builds on previous COAG agreements such as 1995 National Competition Policy and the 2006 National Reform Agenda. One aspect of this reform agenda was that all governments will establish processes to undertake best-practice regulation impact assessment to demonstrate that the benefits of regulations outweigh the costs, including having regard to the differential impact and experience of regulation on businesses ([ref](#)).

##### *Right to Information Act 2009*

The [Right to Information Act 2009](#) (the Act) ensures access to information held by public authorities by:

- authorising and encouraging greater routine disclosure of information held by public authorities without the need for requests or applications
- authorising and encouraging greater active disclosure of information held by public authorities in response to informal requests without the need for applications
- giving members of the public an enforceable right to information held by public authorities, and
- providing that access to information held by public authorities is restricted in only limited circumstances, which are defined in the Act.

The Right to Information Act recognises that some information held by a public authority should not be released. The types of information that may be withheld from release include:

- Executive Council information
- Cabinet information
- internal briefing information of a Minister in connection with the official business of a public authority and in connection with the Minister's Parliamentary duty
- information not relating to official business
- information affecting national or state security, defence or international relations
- information relating to the enforcement of the law \*
- information that is protected by Legal professional privilege \*
- information related to a closed meeting of a Council \*
- information communicated by other government jurisdictions \*
- internal deliberative (working) information \*
- personal information \*

	<ul style="list-style-type: none"> <li>• information relating to business affairs of third party *</li> <li>• information relating to the business affairs of the a public authority *</li> <li>• information obtained in confidence *</li> <li>• information about procedures and criteria used in financial, commercial and labour negotiations, the execution of contracts, the defence prosecution and settlement of cases and similar activities *</li> <li>• information that is likely to affect the State’s economy *</li> <li>• information that is likely to affect the cultural heritage and natural resources of the State *</li> </ul> <p>*These exemptions are subject to a public interest test. The matters which must be considered in deciding whether disclosure of information is contrary to the public interest are set out in Schedule 1 of the Right to Information Act. The matters that are irrelevant in deciding if the disclosure of the information is contrary to the public interest are specified in Schedule 2 of the Right to Information Act.</p> <p>Section 23 of the Act requires principal officers of public authorities to prepare and promulgate policies and procedures for the release of information under the Act. The usual procedure for release of government information is determined by the type of information and is categorised as required disclosure (ie. by law), routine disclosure, active disclose and assessed disclosure.</p> <p>For example, under the State Service Act (1990) or the Financial Management and Audit Act (1990), certain government documents such as annual reports, budgets or performance audits must be made publicly available.</p>
<p><b>Policy details (to 30 June 2021)</b></p>	<p>There are several policies and processes that indicate that the Queensland Government’s default position is to consult with the public throughout the policy development cycle.</p> <p><i>Best Practice Regulation</i></p> <ul style="list-style-type: none"> <li>• The Queensland Government has established principles that guide all regulatory processes including: <i>consulting effectively with affected key stakeholders at all stages of the regulatory cycle</i></li> <li>• All proposed regulations that meet the requirements of a RIS must undergo the prescribed impact assessment and, once approved, a Consultation RIS is released for full public consultation. The consultation process must comply with any legislative requirements</li> <li>• Preliminary Impact Assessments might also involve targeted stakeholder consultation</li> <li>• Government agencies must comply with the best practice principles and minimum requirements of the ‘Stakeholder Consultation Protocol’ for ensuring effective consultation at all stages of the regulatory cycle.</li> <li>• Submissions from the public in response to a Consultation RIS are not publically released</li> </ul> <p><i>Tools and resources for public consultation</i></p> <ul style="list-style-type: none"> <li>• The government has developed a number of policies and guidelines to set standards for community engagement in policies, programs and services. This includes the Online Community Engagement Policy and a suite of related resources (<a href="#">ref</a>).</li> <li>• There is an online platform for the posting of any proposals that are open for public consultation (e.g. via survey, written submission, or public briefings) (<a href="#">ref</a>).</li> </ul>



*Cabinet Handbook:*

- The [Cabinet Handbook](#) states that: *Consultation is a fundamental and mandatory part of the development of all Cabinet submissions.* Consultation with persons or organisations external to government (including employers, unions, community groups, and special interest groups) should be a routine part of policy development.

## ST\_GOVER3 Assessing the potential health impacts of all policies

### *Good practice statement*

There are processes (e.g. health impact assessments) to assess and consider health impacts during the development of policies that affect the healthiness of food environments and/or diet, nutrition, obesity and NCDs

### **Definitions and scope**

- Includes policies, procedures, guidelines, tools and other resources that affect the healthiness of food environments and/or diet, nutrition, obesity and NCDs during and following implementation of all policies
- Includes the establishment of cross-department governance and coordination structures while developing policies with food-related outcomes
- Includes workforce training and other capacity building activities in healthy public policy for non-health departments (e.g. agriculture, education, communications, trade)
- Includes monitoring or reporting requirements related to health impacts for non-health departments

### **Context**

#### *National regulation reform*

In 2012, the Council of Australian Governments (COAG) agreed to a new regulatory and competition reform agenda: *National Compact on Regulatory and Competition Reform: Productivity Enhancing Reforms for a More Competitive Australia* (the Compact). The Compact builds on previous COAG agreements such as 1995 National Competition Policy and the 2006 National Reform Agenda. One aspect of this reform agenda was that all governments must establish processes to undertake best-practice regulation impact assessment to demonstrate that the benefits of regulations outweigh the costs, including having regard to the differential impact and experience of regulation on businesses ([ref](#)). In other words, the objective of a new or amended policy proposed must not restrict competition unless there are net benefits to the community as a whole.

### **Policy details (to 30 June 2021)**

#### *Our Future State – Advancing Queensland’s Priorities*

Between 2018 and 2020, the Queensland Government had a whole-of-government priority to Keep Queenslanders healthy under *Our Future State: Advancing Queensland’s Priorities*. Cross-department governance and coordination structures were established and priority targets set (including obesity). A Roadmap outlined the actions achievable in six to twelve months. These Roadmaps included policies with food-related outcomes.

## ST\_GOVER4 Government workforce to support public health nutrition

### *Good practice statement*

The capacity (number of staff and their capabilities) of the government's public health nutrition workforce is commensurate with the size of the food and nutrition problems of the population and government resources for health

### **Definitions and scope**

- Estimate of the size (i.e. number of full time equivalent (FTE) persons employed) of the government's population nutrition workforce
- The workforce comprises anyone whose primary role relates to public health nutrition and who is employed full time, part time or casually by the government to perform a public health nutrition-related role. The position may be in the Department of Health, independent statutory authority/agency, other government agency/department.
- 'Public health nutrition' includes promotion of healthy eating, and policies and programs that support healthy food environments for the prevention of obesity and diet-related NCDs. The definition **excludes** all one-on-one and group-based promotion (primary care, antenatal services, maternal and child nursing services etc.), food safety, micronutrient deficiencies (e.g. folic acid fortification) and undernutrition

### **Policy details (to 30 June 2021)**

#### *Public Health Nutrition Workforce*

Health and Wellbeing Queensland requires a public health nutrition workforce to achieve its purpose. Some Hospital and Health Services employ a public health nutrition workforce, however, the exact FTE is unknown.

- Health and Wellbeing Queensland's public health nutrition workforce is 11.1 FTE
- The Department of Health's public health nutrition workforce is 1.7FTE
- The Queensland Nutrition Collaborative comprises professionals from across sectors with an interest in nutrition promotion. Current membership of the Collaborative is 358. The Collaborative aims to meet twice a year for networking and professional development.
- The Queensland Dietitians and Nutritionists Strategic Coalition has formed a Prevention Community of Practice to progress a public health nutrition and clinical prevention priority relevant to clinicians.
- The Paediatric Obesity Transformers Committee has 80 members from across the health care continuum working to prevent and manage childhood obesity.

## ST\_GOVER5 Independent health promotion agency

### *Good practice statement*

There is a statutory health promotion agency in place that includes an objective to improve population nutrition, with a secure funding stream

### **Definitions and scope**

- The focus of this indicator is on whether there is a health promotion agency established through legislation that includes an objective to improve population nutrition (as specified in relevant legislation, strategic plans or on the agency website)
- Secure funding stream involves the use of a hypothecated tax or other source of funding that can be considered relatively secure

### **Policy details (to 30 June 2021)**

#### *Health and Wellbeing Queensland*

- Health and Wellbeing Queensland (HWQld) was established on 1 July 2019 as a statutory health promotion agency under the *Health and Wellbeing Queensland Act 2019* (HWQld Act) to reduce the burden of chronic diseases and reduce health inequity.
- HWQld is funded by the Queensland Government through the health portfolio and focuses on obesity prevention targeting three key areas: nutrition, physical activity and wellbeing.
- The main functions listed under the HWQld Act are to:
  - facilitate and commission activities to prevent illness and promote health and wellbeing.
  - develop partnerships and collaborate with other entities to further its objective or carry out its functions under the HWQld Act.
  - give grants for activities to further its objective or carry out its functions under the HWQld Act.
  - monitor and evaluate activities to prevent illness and promote health and wellbeing.
  - develop policy and advise the Minister and government entities about preventing illness and promoting health and wellbeing.
  - coordinate the exchange of information about activities to prevent illness and promote health and wellbeing.
- The 2019-20 and 2020-21 Annual Reports provide full details of the functions and outcomes of HWQld ([ref](#)).

## Policy area: Monitoring & Intelligence

Good practice statement for this domain: The government’s monitoring and intelligence systems (surveillance, evaluation, research and reporting) are comprehensive and regular enough to assess the status of food environments, population nutrition and diet-related NCDs and their inequalities, and to measure progress on achieving the goals of nutrition and health plans

### Indicators in this domain by level of government:

Policy area: Monitoring and intelligence		
National	Federal	State/Territory
	AUD_MONIT1: Monitoring food environments	ST_MONIT1: Monitoring population nutrition intake
	AUD_MONIT2: Monitoring population nutrition intake	ST_MONIT2: Monitoring population body weight
	AUD_MONIT3: Monitoring population body weight	ST_MONIT3: Evaluation of major nutrition-related programs and policies
	AUD_MONIT4: Evaluation of major nutrition-related programs and policies	ST_MONIT4: Research funding for obesity and NCD prevention
	AUD_MONIT5: Research funding for obesity and NCD prevention	

**Details on State/Territory-level indicators in this domain:**

<b>ST_MONIT1 Monitoring population nutrition intake</b>	
<i>Good practice statement</i> There is regular monitoring of adult and childhood nutrition status and population intakes against specified intake targets or recommended daily intake levels	
<b>Definitions and scope</b>	<ul style="list-style-type: none"><li>• Includes monitoring of adult and child intake in line with the Australian Dietary Guidelines</li><li>• Includes monitoring of adult and child intake of nutrients of concern and non-core/discretionary foods including sugar-sweetened beverages (even if there are no clear intake targets for all of these)</li><li>• 'Regular' is considered to be every five years or more frequently</li></ul>
<b>Context</b>	<i>National data sources</i> With funding from the Federal Government, the Australian Bureau of Statistics conducts nationwide National Health Surveys every 3 years, and data from these surveys is available at the State/Territory level. See the Australian Federal Government summary for more information.
<b>Policy details (to 30 June 2021)</b>	<i>Queensland Preventive Health survey</i> <ul style="list-style-type: none"><li>• The Preventive Health Branch, Department of Health, conducts annual preventive health telephone surveys for adults and children. Data is self-reported and proxy reported.</li><li>• The most recent data available was collected between Oct 2019 – March 2020</li><li>• The 2019-2020 surveys collected information on fruit and vegetable consumption (daily serves; 3+ vegetable serve/day) and alcohol consumption (lifetime and single occasion risky drinking).</li><li>• Data are reported biannually in the Chief Health Officer report. The most recent report is 2020 (<a href="#">ref</a>), and via the Queensland survey analytic system (QSAS) online interactive visualisations (<a href="#">ref</a>).</li></ul>

## ST\_MONIT2 Monitoring population body weight

### *Good practice statement*

There is regular monitoring of adult and childhood overweight and obesity prevalence using anthropometric measurements

### **Definitions and scope**

- Anthropometric measurements include height, weight and waist circumference
- 'Regular' is considered to be every five years or more frequently

### **Context**

With funding from the Federal Government, the Australian Bureau of Statistics conducts nationwide National Health Surveys every 3 years, and data from these surveys is available at the State/Territory level. Since 2007-08, the National Health Survey has included measured height and weight data for all ages.

### **Policy details (to 30 June 2021)**

#### *Queensland Preventive Health survey*

- Survey data are reported via the Queensland survey analytic system (QSAS) online interactive visualisations ([ref](#)) (in addition to the Health of Queenslanders Report mentioned below).
- Measuring of children's height and weight at key stages of primary and secondary schools is not a current Queensland Government priority.
- However, the Queensland Department of Health releases biennial [The health of Queenslanders report](#).
- The most recent report is 2020 ([ref](#)).

## ST\_MONIT3 Evaluation of major nutrition-related programmes and policies

### *Good practice statement*

Major nutrition-related programs and policies are regularly evaluated to assess their effectiveness and contributions to achieving the goals of the nutrition and health plans

### **Definitions and scope**

- Includes any policies, guidelines, frameworks or tools that are used to determine the depth and type (method and reporting) of evaluation required
- Includes a comprehensive evaluation framework and plan that aligns with the key preventive health or nutrition implementation plan
- The definition of a major programs and policies is to be defined by the relevant government department
- Evaluation should be in addition to routine monitoring of progress against a project plan or program logic

### **Policy details (to 30 June 2021)**

#### *Health and Wellbeing Queensland Monitoring, Evaluation and Learning Framework (MEL-Framework)*

- The MEL-Framework aims to provide the overarching structure to shape MEL activities within HWQld, particularly over the course of the current strategic plan (2020-2024). Based on a systems approach, it will provide high-level guidance that is relevant over the long-term. A high-level Theory of Change illustrates how HWQld's actions will influence the system that holds overweight/obesity and health inequity in place and contribute to population level outcomes and impacts.
- The Theory of Change includes four 'Systems Components' to represent the parts of the system HWQld is trying to influence: Policies; Practices; Networks; and Mindsets.
- The MEL-F will answer a set of Key Evaluation Questions, organised according to the Theory of Change.
  - Are trends in diet, physical activity, and healthy weight improving, particularly for those with most potential to benefit?
  - To what extent are Queenslanders living in equitable, health promoting systems, and empowered to have a nourishing diet and be physically active?
  - What examples of impact are there for individuals, organisations, and communities?
  - What systemic changes are happening because of the collective work of HWQld?
  - To what extent has HWQld established and embedded organisational enablers for systems change?

#### *The Prevention Strategic Framework 2017 to 2026 – Performance Review Reports*

- These reports are the assessment of progress of the Strategic Framework and describe status and progress against key indicators for health and wellbeing interventions and identifies drivers of and barriers to implementation over the reporting period ([ref](#)). The most recent report is 2018-19.
- Responsibility for evaluation of nutrition programmes and policy moved to HWQld from 1 July 2019.



## ST\_MONIT4 Research funding for obesity & NCD prevention

### *Good practice statement*

Government funded research is targeted for improving food environments, reducing obesity, NCDs and their related inequalities

### **Definitions and scope**

- Includes the clear identification of research priorities related to improving food environments, reducing obesity, NCDs and their related inequalities in health or medical research strategies or frameworks
- Includes identifying research projects conducted or commissioned by the government specifically targeting food environments, prevention of obesity or NCDs (excluding secondary or tertiary prevention)
- It is limited to research projects committed to or conducted within the last **three years**
- Excludes research grants administered by the government (including statutory agencies) to a research group where the allocation of a pool of funding was determined by an independent review panel
- Excludes routine evaluation of interventions that can be expected to be included as part of an intervention program budget (this is explored in ST\_MONIT3)

### **Policy details (to 30 June 2021)**

#### *Health and Wellbeing Research Framework*

- HWQld is developing a Research to Impact agenda to build a knowledge base for obesity prevention, improving population health and wellbeing and reducing health inequities in Queensland.
- The primary focus is overweight and obesity, nutrition, physical activity, wellbeing and equity aligned to the Theory of Change systems components (Policy; Practice; Networks; and Mindsets).
- HWQld is partnering with the University sector on grant applications and supporting PhD students and Fellowships related to novel and innovative research to address obesity.

## Policy area: Support for Communities

Good practice statement for this domain: The government provides coordinated support mechanisms and resources for community-based interventions to create healthy food environments, improved population nutrition, reductions in obesity, diet-related NCDs and their related inequalities

### Indicators in this domain by level of government:

Policy area: Support for communities		
National	Federal	State/Territory
NAT_COMM1: Coordinated support for multi-faceted community-based interventions	AUD_COMM1: Implementation of social marketing campaigns	ST_COMM1: Coordinated support for multi-faceted community-based interventions
NAT_COMM2: Food and nutrition in education curricula		ST_COMM2: Implementation of social marketing campaigns
		ST_COMM3: Food and nutrition in education curricula

**Details on State/Territory-level indicators in this domain:**

<p><b>ST_COMM1</b> Coordinated support for multi-faceted community-based interventions</p>	
<p><i>Good practice statement</i></p> <p>The government has put in place mechanisms to provide broad and coordinated support for creating and maintaining healthy food environments at the community level across multiple settings</p>	
<p><b>Definitions and scope</b></p>	<ul style="list-style-type: none"> <li>• Community settings include workplaces, sporting clubs, recreation centres and groups (e.g. art, music, dance and drama; scouts and guides), youth groups, cultural and religious community groups, community centres and neighbourhood houses, service clubs, men’s sheds, community groups involved in gardens or sustainable living, community markets and events, church and other nongovernment groups who provide support to others</li> <li>• Includes comprehensive and flexible resources, guidelines and frameworks, expertise and workforce training to support implementation of community-based interventions</li> <li>• Includes the establishment of workforce networks for collaboration, shared learning and support across settings</li> <li>• Includes recognition or award-based programs to encourage implementation</li> <li>• Excludes specific support for healthy food provision in schools, hospitals and other government settings (this is covered in the Food Provision and Food Retail domains)</li> <li>• Excludes the implementation of programs that focus on one-on-one or group-based nutrition education or health promotion</li> </ul>
<p><b>Policy details (to 30 June 2021)</b></p>	<p><i>Prevention Program Investment Review Process</i></p> <ul style="list-style-type: none"> <li>• HWQld established an independent, evidenced-based Prevention Program Investment Review Process to assess 10 statewide preventive health programs, including nutrition programs.</li> <li>• The aim of the review was to assess the effectiveness of prevention program outcomes, value for money and alignment to HWQld priorities.</li> <li>• The review achieved a consolidated prevention program budget of \$68,081,020 over three years (FY2021–2024) to develop a chronic disease prevention system encompassing a suite of high quality and evidence-based prevention programs that will support Queenslanders to live healthier lives and reduce levels of chronic disease.</li> <li>• A new strategic management approach for future prevention program partnerships is currently being implemented based on three key pillars: HWQld-led governance, single-point evaluation, and communication and marketing.</li> <li>• This new approach will streamline and strengthen the collective impact of statewide prevention programs, while enabling HWQld to provide a consistent, high-quality and collaborative support structure for program providers.</li> <li>• The newly convened Prevention Programs Collective group will now provide the statewide forum for HWQld to work collaboratively with program partners to ensure ongoing investment remains focused on high quality and evidence based obesity prevention activity, and reducing health inequity for Queenslanders.</li> <li>• The Prevention Program Collective group currently comprises the six (6) continuing HWQld prevention program partners, and is Co-Chaired by both the HWQld Chief Executive and a consumer representative.</li> </ul>

#### *QCWA Country Kitchens*

- Country Kitchens aims to help rural and remote Queenslanders learn to cook healthy nutritious meals at home and encourage healthy eating within their local communities. The Country Kitchens program builds the capacity of the Queensland Country Women's Association (QCWA) to support healthy eating and lifestyle initiatives in rural and regional communities. The QCWA is supporting local branches to implement the Country Kitchens Healthy Catering Guidelines to improve food and drinks supplied at branch meetings and promote healthier food environments in their local communities.
- In 2020–2021 there were 189 QCWA volunteer members registered as QCWA Country Kitchens Branch Facilitators and 87 of them completed 144 training activities to build skills and capacity.
- There were 578 healthy eating and healthy lifestyle initiatives, ranging from recipe promotions and healthy eating showcases to hands on nutrition workshops and cooking skills classes, delivered by the trained QCWA Country Kitchens Branch Facilitators. These trained facilitators and their Branches established partnerships locally with approximately 80 organisations to help deliver many of these health promotion activities in their communities.

#### *Jamie's Ministry for Food*

- Jamie's Ministry for Food supports Queenslanders to change to a healthier way of eating through provision of practical hands-on cooking classes which demonstrate how easy and cheap it can be to make simple and nutritious meals from scratch. Areas of high need are prioritised for the Mobile Kitchen locations and the program proactively recruits participants from high risk population groups e.g. concession card holders, Aboriginal and Torres Strait Islanders and young people.
- Jamie's Ministry for Food delivers hands on food literacy and cooking skills courses, in a friendly, supportive and fun environment, through a centre at Ipswich and a Mobile Kitchen that travels across the state. The program delivers 'Train-the-Trainer' and 'Internship' programs that will build the capacity of local communities and organisations to sustain ongoing delivery of the food literacy and healthy eating messages.
- During 2020–2021, more than 2,500 Queenslanders attended a Jamie's Ministry of Food course or event. Participation from the priority groups was very high across all delivery modes, including the Ipswich Centre, Mobile Kitchen, Outreach Program and online. Of the participants, 66 per cent held concessions, 19 per cent identified as Aboriginal or Torres Strait Islander peoples, and 62 per cent were young people (12–29 years), exceeding all targets set in terms of participant reach.

#### *Workplace setting*

- Workplace Health and Safety Queensland provide advice, resources, and a step-by-step guide for workplaces to implement health and wellbeing initiatives ([ref](#)).

#### *The Healthy Tuckshop Support Program*

- Funded since 2006 by the Department of Health with some in-kind support from the Department of Education and Training and delivered by the Queensland Association of School Tuckshops (QAST). The Healthy Tuckshop Support Program provides support to government and non-government schools to implement and maintain the Smart Choices: Healthy Food and Drink Supply Strategy for Queensland Schools.
- For 2015-18 QAST are funded to deliver a range of support services including face-to-face networking opportunities, healthy recipes and menu planning and electronic communications.

#### *Deadly Choices*

- Good Quick Tukka is part of the suite of Deadly Choices Healthy Lifestyle Programs offered to First Nations communities throughout Queensland.
- Good Quick Tukka aims to teach Aboriginal and Torres Strait Islander people cooking skills by helping them to explore budget friendly recipes using a healthy range of foods using different cooking techniques.
- The program is often delivered to communities at community events as cooking demonstrations and has also been delivered online via social media channels.

#### *Good Sports Program*

- Funded by the Queensland Government and delivered by the Australian Alcohol and Drug Foundation, the Good Sports Program provides resources and training to help sports clubs tackle a range of issues including healthy eating.
- The Good Sports, Healthy Eating program works with clubs to develop a Healthy Eating Policy and focuses on the following areas ([ref](#)):
  - Safe food handling
  - Increasing the range of healthy food and drink options
  - Increasing the nutritional quality of food provided
  - Working with clubs on offering healthier food including recipes
  - Displaying and promoting healthy food and drink options
  - Healthy fundraising ideas
- The program follows the Queensland Government-approved Food for Sport guidelines ([ref](#)) and encourages clubs to implement these guidelines.
- More than 570 clubs participated in the program in 2019-20 and 514 in 2020-21 representing nearly 40 unique sporting codes.
- Nearly 190 new clubs were accredited in 2019-20 to level 2 or 3 (most advanced of the three levels) and 95 in 2020-21.

#### *Creating a Healthy South West region*

- HWQld is working with South West Hospital and Health Service to deliver a suite of prevention programs, initiatives and policies relating to obesity, nutrition and physical activity that align with the Strategic Objectives of both parties. An MOU was signed in August 2021 to formalise the partnership and a Draft Shared Initiative Plan outlines the work and outcomes to be delivered.
- The Shared Initiatives Plan includes the South West Nutrition Collaborative supporting nutrition priorities including development of a Train the Trainer program to extend delivery of Jamie's Ministry of Food in the region; development of the Thankful Food Pharmacy model to integrate clinical services with prevention, while breaking down food access; development of the Boost Your Family app-based wellbeing program to supports children and families to build better health and lifestyle habits together; local contextualisation and implementation of the Paediatric Obesity Model of Care; development of a Clinical Prevention ECHO series; building health promotion capacity and wellness in pregnancy and 0-12m; and supporting regional promotion and participation in healthy eating initiatives including Healthy Kids Menu, A Better Choice Strategy and Food For Sport.

## ST\_COMM2 Implementation of social marketing campaigns

### *Good practice statement*

The government implements evidence-informed public awareness, informational and social marketing campaigns across a range of broadcast and non-broadcast media to promote healthy eating

### **Definitions and scope**

- Includes television, radio, news media, web-based (including websites and social media), billboards and posters, etc (see examples in the Food promotion domain)
- Evidence-informed includes the use of peer-reviewed literature in the design and implementation of the campaign, the use of an existing successful campaign that has been evaluated, or the co-design and testing of campaign messages with the target audience(s)
- Includes campaigns that focus on promoting the intake of specific foods (e.g. fruit and vegetables, water), reducing intake of nutrients of concern, or supporting the public to make healthy choices (e.g. use of front-of-pack nutrition labels)
- Includes campaigns that are embedded within and complemented by broader policies and programs

### **Policy details (to 30 June 2021)**

#### *Boost Your Healthy*

- Boost your Healthy was Health and Wellbeing Queensland's response to COVID-19. This was developed alongside 31 partner organisations delivering through three themes – Nutrition, Physical Activity and Wellbeing:
  - Boost your activity – we partnered with the Department of Housing and Public Works through Sport and Recreation and other partners to share information and resources to help Queenslanders move more at home
  - Boost your healthy eating – we partnered with a range of trusted organisations to provide information, support, recipes and other tips to help Queenslanders make eating well at home easy, fun and tasty.
  - Boost your wellbeing – we worked with the Queensland Council of Social Service and other partners to provide a suite of tools, support and information on establishing healthy routines, getting enough sleep and tips for workers on the frontline or at home.
- This work led to a series of public health campaigns, including:
  - The Billion Steps Challenge in partnership with 10,000 Steps (launched May 2020). Goal achieved in 32 days, with over 5,500 Queenslanders from across 319 postcodes taking part. 10,000 Steps reported a total of 4128 new individuals signed up to the program, an average of 128 per day.
  - QCWA Cook at Home Challenge in partnership with the QCWA Country Kitchens program (launched June 2020). Across the 6-week campaign, 854 entries received from across the State.
  - My health for life Wellbeing Series videos in partnership with the My health for life program (launched July) achieved over 14,000 views.
  - The Healthy Pledge Challenge in partnership with the Deadly Choices program reached audience of over 16,000 on socials and on website (launched September).

#### *Health and Wellbeing Queensland public communications*

- Health and Wellbeing Queensland (HWQld) delivers a range of external communications and media activities. These activities are evidence-based, responsive and research driven to ensure the right message is being communicated at the right time, to the right people – no matter who they are, or where they live.

- Activities include campaigns, social media content, website and digital content, direct emails to subscribers, outgoing sponsorships, proactive and reactive media releases and interviews and invited presentations and conference addresses.
- HWQld, like other Queensland government agencies, understands that to meet the needs and expectations of such a variety of stakeholders, a variety of mediums is required to be used.
- Over the period FY21/22, HWQld has delivered on a range of external communications and media activities including but not limited to:
  - Expansion of the Boost your Healthy campaign, a digital hub providing support, inspiration, and ideas to help Queenslanders stay healthy and active.
  - Developed and launched the Queenslandher campaign, a digital wellbeing campaign highlighting stories of Queensland women who rose above challenging times.
  - Developed and launched Queenslandher phase two, with the support of the Queensland Rugby League (QRL).
  - Monthly distribution of HWQld Stakeholder newsletter (n = 2016 subscribers) and Boost your Healthy newsletter (n = 1824 subscribers).
  - Daily distribution of social media content across Facebook, LinkedIn, Twitter, and Instagram.
  - Regular updating of HWQld website to include relevant news, partner program promotion, content, resources, publications, and videos.
  - Outgoing sponsorship support for events including The Australian and New Zealand Obesity Society Annual Scientific Meeting, Gold Coast Marathon Junior Dash, The Mater Foundation International Womens Day Fun Run, the Queensland Symphony Orchestra, and the Australian Breastfeeding Association's Health Professionals Seminar.
  - Distribution of proactive and reactive media releases and commentary pieces, resulting in over 250 media mentions during the past 12 months.

*Healthier. Happier.*

- The overarching goal of the ongoing Healthier. Happier. social marketing activity is to improve the health of Queenslanders by reframing attitudes towards, and understanding of healthy weight, diet and physical activity, to encourage healthier lifestyle choices.
- This includes the interactive [Healthier. Happier.](#) website that features tools, recipes, tips and information, and social media (Facebook and Instagram).
- The Healthier. Happier. social marketing activity has delivered over 4.4 million users and over 9.2 million unique page views on the Healthier. Happier. website from 2013 to June 2021.
- Multiple social marketing campaigns such as *Colour Wheel*, *Menu Labelling* and *Straight Answers* were in market 2016-18. These campaigns aimed at encouraging Queenslanders to increase their consumption of fruit and vegetables by including more colour in their diet, driving awareness of menu labelling legislation changes and busting common health and food related myths.

- Further targeted social marketing campaigns were delivered in 2019-21 following extensive research such as *Find your happy healthy* and *End your unhealthy relationships* which were designed to inform Queenslanders that small changes to being healthy is achievable, and that it can make you happy. The *Find your happy healthy* campaign encouraged Queenslanders to work out what they love, make sure it's healthy and do more of it, whilst the *End your unhealthy relationship* campaign was designed to make younger Queenslanders aware that their unhealthy behaviours are putting them at risk of becoming overweight or obese therefore encourages them to end one of their unhealthy habits with food or physical inactivity to see how good they can feel.
- Ongoing consumer research will determine future social marketing campaign and communication activities.
- Since 2018, social marketing campaigns 'HappyHealthy' and 'Dumpthejunk' have been in market, with tools, recipes, tips and information for 'Happy Families' also being added to the Healthier.Happier. website.

Alongside the major campaign activity, Healthier. Happier. behaviour change messaging extends to Queenslanders through Queensland Health owned channels and partnerships with other Queensland Government departments and non-government organisations., such as Health and Wellbeing Queensland, Bridge to Brisbane fun run, Department of Environment and Science and the Department of Housing and Public Works.



## ST\_COMM3 Food and nutrition in education curricula

### *Good practice statement*

The government provides guidance and support to educators for the inclusion of food and nutrition curricula for preschool, primary and secondary school children

### **Definitions and scope**

- Includes food and nutrition as a priority/focus area of the curriculum as a stand-alone component or embedded within other curriculum areas
- Includes the provision of training, resources, guidelines or expert support to educators to support them in educating students
- Includes government-funded education programs on healthy eating or growing and preparing food (e.g. kitchen garden programs)
- Includes government-supported programs that encourage healthy eating in the education setting (e.g. fruit and vegetable snack and water breaks)

### **Context**

#### *National Curriculum*

Australia transitioned to a new national curriculum in 2015. The national curriculum is currently undergoing a review which is due to be completed by the end of 2021 with a revised Australian Curriculum to be released in 2022 ([ref](#)). The national curriculum incorporates food and nutrition as a focus area within the Health and Physical Education Learning Area. The Australian Curriculum Assessment and Reporting Authority is responsible for the development of the national curriculum and national assessment of student progress.

### **Policy details (to 30 June 2021)**

#### *Pick of the Crop*

- Pick of the Crop is a new whole-school healthy eating program to increase the opportunities for Queensland primary school children to learn about and eat vegetables and fruit at school.
- The program was piloted in 2021 across 35 schools in Bowen and Burdekin, Bundaberg and Logan and reaching over 10,000 students.
- Schools are embedding food and nutrition across key learning areas in the curriculum; learning with growers and producers; supporting healthy school environments; and connecting with local families and communities as part of the program components.
- Food literacy professional development modules were rolled out to participating schools to support teachers integrate food literacy into the curriculum using age-appropriate pedagogy and First Nation perspectives.
- HWQld provided a submission to the review of the Australian Curriculum in 2021.
- HWQld has developed and made video content available to educators on school gardens and classroom cooking with a focus on the sensory properties of food.

#### *Life Education*

- Life Education supports the delivery of health education modules addressing nutrition, physical activity, healthy weight, smoking and alcohol. The target group includes primary school students from state and non-state schools across Queensland, with a particular focus on rural and remote areas and communities with socio- educational disadvantage (as measured by ICSEA).

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|  | <ul style="list-style-type: none"><li>• In 2020-21, the program provided health education to 89,403 Queensland pre-school and primary school children, including 3,000 children who identified as First Nations, and supported approximately 2,500 classroom and pre-school teachers to integrate nutrition and physical activity into their classroom teaching; expanded the digital platform Life Education @ Home – a customised learning management system featuring educational online health education resources to support schools and parents during COVID-19; registered more than 215 pre-school and primary schools on the Life Education @ Home platform, including many new schools in regional and remote areas of Queensland; and engaged more than 6,000 parents registered via the website and Life Education @ Home platform.</li></ul> |
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